

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
							CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			IND	DEP	IND	DEP	IND	DEP
1	1						51						
2		1					52						
3			1				53						
4			1	1			54						
5			1	1	1		55						
6			1	1	1	1	56						
7			1	1	1	1	57						
8			1	1	1	1	58						
9			1	1	1	1	59						
10			1	1	1	1	60						
11			1	1	1	1	61						
12			1	1	1	1	62						
13			1	1	1	1	63						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1						TOTAL IND.						
TOTAL DEP.	13	→		→		→	TOTAL DEP.						
TOTAL CLAIMS	14						TOTAL CLAIMS						